



# Conditional Use Application

Page 1 of 2

Updated **MAY 2024**

## NOTICE TO APPLICANT

This application will not be processed until the following items are submitted:

- Filing fee (checks payable to: City of Pooler)
- Preliminary site plan including (1),(2), (3) and (6) of Appendix A, Article V, Section 4 (c)
- One copy if 11" x 17" or smaller; 16 copies if larger
- Signed and dated Campaign Contribution and Conditional Standards forms
- Authorization of property owner signed, dated, and notarized

Under Contact Information, addresses and telephone numbers do not have to be repeated if already provided. Staff correspondence will be sent to one designated contact person, not all listed.

## OFFICE USE ONLY

Hearing Date: \_\_\_\_\_ Published in Legal Organ: \_\_\_\_\_

Letters of Notification Mailed: \_\_\_\_\_ Sign Posted: \_\_\_\_\_

Action (minutes attached):  Approved  Denied Results Mailed to Applicant: \_\_\_\_\_

## Contact Information

Applicant Name \_\_\_\_\_ Applicant Phone \_\_\_\_\_

Applicant Mailing Address \_\_\_\_\_ Applicant Email \_\_\_\_\_

Property Owner Name \_\_\_\_\_ Property Owner Phone \_\_\_\_\_

Property Owner Mailing Address \_\_\_\_\_ Property Owner Email \_\_\_\_\_

Contact Person Name \_\_\_\_\_ Contact Person Phone \_\_\_\_\_

Contact Person Mailing Address \_\_\_\_\_ Contact Person Email \_\_\_\_\_

## Property Information

Location Address \_\_\_\_\_ Parcel Identification # \_\_\_\_\_

Current Zoning \_\_\_\_\_ Current Use \_\_\_\_\_



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Page 2 of 2

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Description of proposed use, listing specific sections of zoning ordinance that apply:

Description of proposed activities, number of units, hours of operation:

Description of activities undertaken by the developer and subsequent occupant to mitigate all adverse impacts upon the surrounding properties before, during, and after the completion of development activities:

Proposed Starting Dates of Land Disturbance, Construction, Completion, Use Opening, First Occupancy:

## Adjacent Property Owners

Name and address of surrounding property owner's primary residence within a radius of 200 ft. of the property as of the date of filing. Include those directly across a public right-of-way. Use an additional sheet if necessary.

Name	Address	Zip
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Name	Address	Zip
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Name	Address	Zip
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Name	Address	Zip
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## Affidavit

I, the undersigned, certify that I have read, examined, and completed this application and certify that all the information pertained in this application is true and correct.

Applicant Name	Applicant Signature	Date
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Attestant Name	Attestant Title	Date
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# Conditional Use Standards

Page 1 of 1

Updated **SEPT 2023**

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## Review Criteria

The Planning & Zoning Commission shall hear and make recommendations upon such uses in a district that are permitted as conditional uses. The application to establish such use shall be approved by the city council on a finding that:

1. The proposed use will not be contrary to the purpose of this ordinance;
2. The proposed use will not be detrimental to the use or development of adjacent properties or the general neighborhood or adversely affect the health and safety of residents and workers;
3. The proposed use will not constitute a nuisance or hazard because of the number of persons who will attend or use such facility, vehicular movement acquainted with the use, noise or fumes generated by or as a result of the use, or type of physical activity associated with the land use;
4. The proposed use will not be affected adversely by the existing uses of adjacent properties;
5. The proposed use will be placed on a lot which is of sufficient size to satisfy the space requirements of said use;
6. The parking and all development standards set forth for each particular use for which a permit may be granted will be met; and,
7. The action will not adversely impact adjacent or nearby properties in terms of property values, by rendering such properties less suitable and therefore less marketable for the type of development to which they are committed or restricted in order to promote the public welfare and protect the established development pattern.

## Additional Mitigation Requirements

The Planning & Zoning Commission may suggest and the Mayor and Council may impose or require such additional restrictions and standards (e.g., increased setbacks, buffer strips, screening, etc.):

1. As may be necessary to protect the health and safety of workers and residents in the community; and
2. To protect the value and use of property in the general neighborhood.

## Affidavit of Receipt

I understand the importance of this document and acknowledge that this affidavit serves as a formal record of my receipt of the document.

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Applicant Name

Applicant Signature

Date



# Campaign Contribution Disclosure Form (Zoning Action Applicant)

Page 1 of 1

Updated **MAY 2024**

Per GA § 36-67A-3, rezoning action applicants and opponents are required to disclose campaign contributions or gifts with an aggregate value of \$250 or more made to any City Official within two years immediately preceding the filing of the application. City Officials include the Mayor, Councilmembers, and Planning & Zoning Commissioners. Rezoning action applicant disclosures shall be filed within ten days after the application for the rezoning action is first filed. If additional space is needed, please attach a second form.

## Hearing Information

\_\_\_\_\_  
Zoning Action/Agenda Item

\_\_\_\_\_  
Planning & Zoning Public Hearing/Meeting Date and Time

\_\_\_\_\_  
City Council Public Hearing/Meeting Date and Time

## Disclosure Statement

Have you made campaign contributions to one or more Pooler City Official(s), including the Mayor, Councilmembers, and/or Planning & Zoning Commissioners, during the past two years that, when combined, total an amount greater than \$250.00?

- NO**, I have not made any campaign contributions to one or more Pooler City Official(s) over the past two years that, when combined, total an amount greater than \$250.00.
- YES**, I have made campaign contributions to one or more Pooler City Official(s) over the past two years that, when combined, total an amount greater than \$250.00  
My contribution information is listed below:

City Official Name	Title	Dollar Value	Description of Gift >\$250
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

I attest that all information provided above is true to fact.

\_\_\_\_\_  
Applicant Name

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date